SAMPLE A

NOTICE OF APPEAL

Sample A NOTICE OF APPEAL - INSTRUCTIONS

In order to appeal you must be "aggrieved". To be "aggrieved" the lower court or administrative agency must have entered a judgment or order that affects your legal rights or costs you money. Usually you must have been a party in the case in the lower court. You may not appeal on behalf of a spouse, child or other relative, or a friend (unless you are a legally appointed guardian). The notice of appeal is filed in the superior court and should be accompanied by a check, money order or cash of \$655.00 which is the filing fee. Checks or money orders should be made payable to "Clerk, Court of Appeal". A second check or money order for \$100.00 made payable to "Clerk of the Superior Court" is a deposit for the clerk's transcript. This second check need not be included if you, as appellant, plan to prepare an appendix under rule 5.1. If you do not have the money for the filing fee, an application for waiver of court fees and costs must accompany the notice of appeal. (See Sample D, for Application for Waiver of Court Fees and Costs.)

Filling out the Notice of Appeal form:

- (1) Your name.
- (2) Your mailing address.
- (3) Your city, state and zip code.
- (4) Your telephone number where you can be reached during the day.
- (5) The plaintiff's name as it appears on your superior court caption.
- (6) The defendant's name as it appears on your superior court caption.
- (7) The superior court number from your superior court case.
- (8) Your name.
- (9) Describe the judgment or order you are appealing.
- (10) The date of the superior court file stamp on the judgment or order you are appealing.
- (11) Current date.
- (12) Your signature.
- (13) Type or legibly print your name.

File: Original plus fees in Superior Court

Bring an extra copy to be file-stamped

for your file.

Serve: All counsel

All self-represented parties

(1) (2) (3) (4)				
				E STATE OF CALIFORNIA
		FOR THE COUN	TY OF	·
(5)				Superior Court No. (7)
(3)	Plaintiff,		,	NOTICE OF APPEAL
	V.			
(6)			,	
	Defendant.			
	ICE IS HERE ed on (10)	EBY GIVEN that (8)		, appeals from (9)
DAT	ED: (11)		(12)	
				Signature
			(13)	Type or Print Name

SAMPLE B

NOTICE OF ENTRY OF JUDGMENT

Sample B

NOTICE OF ENTRY OF JUDGMENT

SUPERIOR COURT OF THE STATE OF CALIFORNIA

FOR THE COUNTY OF

GOLDILOCKS, Plaintiff,	Superior Court No. NOTICE OF ENTRY OF JUDGMENT
V.	
THE THREE BEARS,	
Defendant.	
On December 14, 2002, judgment was entered on b hereto as Exhibit A is a true and accurate copy of the	
DATED: By:	

Attach a copy of judgment or order **Note:**

and Proof of Service

Original in Superior Court with Proof of Service File:

Serve: All counsel

All self-represented parties

SAMPLE C

PROOF OF SERVICE

Sample C

PROOF OF SERVICE - INSTRUCTIONS

Each document you prepare must be served on all counsel and self-represented parties in your case. The document may be served by mail or hand-delivery by someone who is over the age of 18 and not a party to the appeal. If the document is a brief, you must serve one copy on the Superior Court and five copies on the California Supreme Court as well as all counsel and self-represented parties.

How to serve a document:

Make a copy of your document for each party you wish to serve. You may use the attached Proof of Service form and type or print legibly the information in the shaded areas. The original Proof of Service must be attached to the document you are filing with the court and a copy of the Proof of Service must be attached to each copy of the document you serve on the parties.

Filling out the Proof of Service form:

- (1) Your name.
- (2) Your mailing address.
- (3) Your city, state and zip.
- (4) Your telephone number where you can be reached during the day.
- (5) The plaintiff's name as it appears on your Superior Court caption.
- (6) Whether plaintiff is "appellant" or "respondent".
- (7) The defendant's name as it appears on your Superior Court caption.
- (8) Whether defendant is "appellant" or "respondent".
- (9) The Court of Appeal number which starts with "F0".
- (10) The Superior Court number from your Superior Court case.
- (11) The date on which the document was served.
- (12) If the document was served by mail, put the word "mailed" in the shaded box, or, if the document was personally handed to the person served, put the words "hand-delivered" in the shaded box.

- (13) State the name of the document which you are filing with the Court of Appeal. If you are filing more than one document, list all documents you are filing at this time.
- (14) State the full names and addresses of all the parties or their attorneys to whom the documents were mailed or hand-delivered.
- (15) The current date.
- (16) The signature of the person who actually served the documents.
- (17) Type or print legibly the full name of the person, address and telephone number of the person who served the documents.

File: Original attached to every filing

Serve: Copy attached to every filing

served on:

Superior Court Supreme Court All counsel

All self-represented parties

(1) (2) (3) (4)					
COURT OF APPEAL, FIFTH APPELLATE DISTRICT STATE OF CALIFORNIA					
(5)	,	F0 (9)			
Plaintiff and (6) v. (7) Defendant and (8)	,	(Super. Ct. No. (10))		
PRO	OOF OF S	SERVICE			
I declare that on (11) copy of (13) on:	, I	(12)	, one		
(14)					
I declare that at the time of service I was at least 18 years of age and not a party to this case. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.					
Dated: (15)	(17)	gnature pe or Print Name			

SAMPLE D

APPLICATION FOR WAIVER OF COURT FEES AND COSTS

Click on link below for printable form.

Form 982a17a = http://www.courtinfo.ca.gov/forms/documents/982a17a.pdf Form 982a17 = http://www.courtinfo.ca.gov/forms/documents/982a17.pdf

Sample D

APPLICATION FOR WAIVER OF COURT FEES AND COSTS - INSTRUCTIONS

When you file your notice of appeal, there is a filing fee of \$655.00 which is due at the time of filing. A deposit of \$100.00 needs to be paid to the Superior Court if you want it to prepare a clerk's transcript for you. If you feel you cannot afford these fees, you may fill out an Application for Waiver of Court Fees and Costs. Generally, you would file the application in the Superior Court when you file your notice of appeal. If you did not file the application in Superior Court you may file it in the Court of Appeal.

Filling out the Application for Waiver of Court Fees and Costs form:

- (1) Your name, mailing address, city, state, zip code and telephone number where you can be reached during the day.
- (2) The name of the court in which you are filing the application. Addresses for the nine Superior Courts and the Court of Appeal are found in Appendix 2.
- (3) The plaintiff's name as it appears on your Superior Court caption.
- (4) The defendant's name as it appears on your Superior Court caption.
- (5) The Superior Court number from your Superior Court case. If you happen to have a Court of Appeal number, also put it here.
- (6) If you can't pay any of the court fees or costs, check box "a". If you can pay part of the court fees or costs, check box "b" and then write down what you can pay.
- (7) Your street address, city, state, zip code and telephone number where you can be reached during the day.
- (8) Write your occupation, employer and employer's address. If you do not have a job, write "unemployed". If you have a spouse and your spouse has a job, write your spouse's occupation, employer and employer's address. If your spouse does not have a job, write "unemployed".
- (9) If you are receiving financial assistance check box 4, then check the box or boxes next to the type of assistance you are receiving.
- (10) If you checked box 4 you have to fill out one of three boxes. Check only one box. If you check box "a" you must write your Medi-Cal number. If you check box "b" you must write your Social Security number and your birth date. If you check box "c" you need to attach verification documents which are listed on the Information Sheet on Waiver of Court Fees and Costs. After you have checked one of these boxes, you are done. Go to the bottom of the form and date and sign it, you do not need to fill out anything else.

- (11) Check this box if your gross monthly income is less than the amount shown on the Information Sheet on Waiver of Court Fees and Costs. If you check this box, fill out items 8, 9a and 9g on the back of the form and date and sign the bottom.
- (12) Check this box if your income is not enough to pay for the common necessaries of life for yourself and your family and still pay court fees and costs. If you check this box, you have to complete the entire back side of the form, then date and sign the bottom.
- (13) Current date.
- (14) Type or print your name.
- (15) Your signature.

INFORMATION SHEET ON WAIVER OF COURT FEES AND COSTS

(California Rules of Court, rule 985)

If you have been sued or if you wish to sue someone, and if you cannot afford to pay court fees and costs, you may not have to pay them if:

- 1. You are receiving financial assistance under one or more of the following programs:
 - SSI and SSP (Supplemental Security Income and State Supplemental Payments Programs)
 - CalWORKs (California Work Opportunity and Responsibility to Kids Act, implementing TANF, Temporary Assistance for Needy Families, formerly AFDC, Aid to Families with Dependent Children Program)
 - The Food Stamp Program
 - County Relief, General Relief (G.R.), or General Assistance (G.A.)

If you are claiming eligibility for a waiver of court fees and costs because you receive financial assistance under one or more of these programs, and you did not provide your Medi-Cal number or your social security number and birthdate, you must produce documentation confirming benefits from a public assistance agency or one of the following documents, unless you are a defendant in an unlawful detainer action:

PROGRAM	VERIFICATION
SSI/SSP	Medi-Cal Card <i>or</i> Notice of Planned Action <i>or</i> SSI Computer-Generated Printout <i>or</i> Bank Statement Showing SSI Deposit <i>or</i> "Passport to Services"
CalWORKs/TANF (formerly known as AFDC)	Medi-Cal Card <i>or</i> Notice of Action <i>or</i> Income and Eligibility Verification Form <i>or</i> Monthly Reporting Form <i>or</i> Electronic Benefit Transfer Card <i>or</i> "Passport to Services"
Food Stamp Program	Notice of Action <i>or</i> Food Stamp ID Card <i>or</i> "Passport to Services"
General Relief/General Assistance	Notice of Action <i>or</i> Copy of Check Stub <i>or</i> County Voucher

— OR —

2. Your total gross monthly household income is equal to or less than the following amounts:

NUMBER IN FAMILY	FAMILY INCOME
1	\$ 935.42
2	1,262.50
3	1,589.58
4	1,916.67
5	2,243.75

NUMBER IN FAMILY	FAMILY INCOME
6	\$ 2,570.83
7	2,897.92
8	3,225.00
Each additional	327.08

— OR —

3. Your income is not enough to pay for the common **necessaries** of life for yourself and the people you support and also pay court fees and costs.

To apply, fill out the Application for Waiver of Court Fees and Costs (Form 982(a)(17)) available from the clerk's office. If you claim no income, you may be required to file a declaration under penalty of perjury. Prison and jail inmates may be required to pay up to the full amount of the filing fee.

If you have any questions and cannot afford an attorney, you may wish to consult the legal aid office, legal services office, or lawyer referral service in your county (listed in the Yellow Pages under "Attorneys").

If you are asking for review of the decision of an administrative body under Code of Civil Procedure section 1094.5 (administrative mandate), you may ask for a transcript of the administrative proceedings at the expense of the administrative body.

THIS FORM MUST BE KEPT CONFIDEN	11AL — 982(a)(17)
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
-	
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
NAME OF COURT:	
STREET ADDRESS:	
MAILING ADDRESS: CITY AND ZIP CODE:	
BRANCH NAME:	
PLAINTIFF/ PETITIONER:	
DEFENDANT/ RESPONDENT:	
APPLICATION FOR WAIVER OF COURT FEES AND COSTS	CASE NUMBER:
I request a court order so that I do not have to pay court fees and costs.	
1. a. I am <i>not</i> able to pay any of the court fees and costs.	
b. I am able to pay only the following court fees and costs (specify):	
2. My current street or mailing address is (if applicable, include city or town, apartment no.,	if any, and zip code):
3. a. My occupation, employer, and employer's address are (specify):	
b. My spouse's occupation, employer, and employer's address are (specify):	
 I am receiving financial assistance under one or more of the following programs: a. SSI and SSP: Supplemental Security Income and State Supplemental Pa b. CalWORKs: California Work Opportunity and Responsibility to Kids Act, in 	· · · · · · · · · · · · · · · · · · ·
for Needy Families (formerly AFDC) c. Food Stamps: The Food Stamp Program	inpondition of the state of the
d. County Relief, General Relief (G.R.), or General Assistance (G.A.)	
5. If you checked box 4, you must check and complete one of the three boxes below, unit detainer action. Do not check more than one box.	less you are a defendant in an unlawful
a. (Optional) My Medi-Cal number is (specify):	
b. (Optional) My social security number is (specify): and my date of birth is (specify)	acify):
[Federal law does not require that you give your social security number	• /
c. I am attaching documents to verify receipt of the benefits checked in item	s to verify the benefits checked in item 4.] 4, if requested by the court.
[See Form 982(a)(17)(A) Information Sheet on Waiver of Court Fees a office, for a list of acceptable documents.]	and Costs, available from the clerk's
[If you checked box 4 above, skip items 6 and 7, and sign at the bottom of this side.]	
 My total gross monthly household income is less than the amount shown on the and Costs available from the clerk's office. 	Information Sheet on Waiver of Court Fees
[If you checked box 6 above, skip item 7, complete items 8, 9a, 9d, 9f, and 9g on the ba of this side.]	ack of this form, and sign at the bottom
 My income is not enough to pay for the common necessaries of life for me and the also pay court fees and costs. [If you check this box, you must complete the base of the pay income is not enough to pay for the common necessaries of life for me and the also pay court fees and costs. 	
WARNING: You must immediately tell the court if you become able to pay court fees be ordered to appear in court and answer questions about your ability to pay court f	or costs during this action. You may
I declare under penalty of perjury under the laws of the State of California that the information	
attachments are true and correct.	
Date:	
(TVDE OD DDINT NAME)	(SIGNATURE)
(TYPE OR PRINT NAME) (Financial information on reverse)	\-·-·-/



PLA	AINTIFF/PETITIONER:		CASE NUMBER:
_	DANT/RESPONDENT:		
	FINANCIAL IN	FORM/	ATION
	My pay changes considerably from month to month. [If you check this box, each of the amounts reported in item 9 should be your average for the past 12 months.]	10. c.	Cars, other vehicles, and boats (list make, year, fair market value (FMV), and loan balance of each):
	MONTHLY INCOME		Property FMV Loan Balance
	My gross monthly pay is: \$		(1)
	ly payroll deductions are (specify		(2) \$ \$ \$ \$ (3)
	urpose and amount):	А	Real estate (list address, estimated fair market value
-	•	u.	(FMV), and loan balance of each property):
(1	\$ 2) \$		Property FMV Loan Balance
(2	S) \$		- • •
(4	\$ 3) \$ 4) \$		(1)
(- M	Ty TOTAL payroll deduction amount is: \$		(3) \$ \$
	ly monthly take-home pay is	6	Other personal property — jewelry, furniture, furs, stocks,
	a. minus b.): \$	0.	bonds, etc. (list separately):
-	Other money I get each month is (specify source and		, , , , , , , , , , , , , , , , , , ,
	mount; include spousal support, child support, paren-		\$
	al support, support from outside the home, scholar-	11 Ms	y monthly expenses not already listed in item 9b above
Si	hips, retirement or pensions, social security, disability,		e the following:
	nemployment, military basic allowance for quarters		Rent or house payment & maintenance \$
	BAQ), veterans payments, dividends, interest or royalty,		
	rust income, annuities, net business income, net rental ncome, reimbursement of job-related expenses, and net		I kiliki a anad kalambana
	ambling or lottery winnings):	о. d	Clathing
		u. 	Laundry and cleaning
(1	\$\$ 20\$ \$] \$] \$] \$]	f.	
(2	<u> </u>		
(4	\$ 1) \$	-	<u> </u>
(¬ T	he TOTAL amount of other money is:	i.	School, child care \$ \$ Child, spousal support (prior marriage)
	If more space is needed, attach page	i.	Transportation and auto expenses
	abeled Attachment 9d.)	J.	(insurance, gas, repair)\$
	IY TOTAL MONTHLY INCOME IS	k	Installment payments (specify purpose and amount):
	c. plus d.):	K.	(1) \$
	lumber of persons living in my home:		(1) \$ \$ (2) \$ (3) \$ The TOTAL amount of monthly
	elow list all the persons living in your home, including		(3) \$
	our spouse, who depend in whole or in part on you for		The TOTAL amount of monthly
	upport, or on whom you depend in whole or in part for		installment payments is: \$
SI	upport:	ı	Amounts deducted due to wage assign-
	Gross Monthly Name Age Relationship Income		ments and earnings withholding orders: \$
(1	1) \$\$	m.	Other expenses (specify):
(2	2)\$		(1)
(3	\$		(2) \$
(4	(4) \$		(3) \$
(5	\$ 5) \$		(4) \$
Ť	he TOTAL amount of other money is: \$		(5) \$
	f more space is needed, attach page		The TOTAL amount of other monthly
	abeled Attachment 9f.)		expenses is:\$
	IY TOTAL GROSS MONTHLY HOUSEHOLD INCOME IS	n.	MY TOTAL MONTHLY EXPENSES ARE
	a. plus d. plus f.):		(add a. through m.):\$
10. I owr	or have an interest in the following property:	12. Ot	ther facts that support this application are (describe un-
	ash\$	us	sual medical needs, expenses for recent family emergen-
	checking, savings, and credit union accounts (list banks):		es, or other unusual circumstances or expenses to help the
			ourt understand your budget; if more space is needed,
(2	\$\$ 2)\$ 3) \$	att	tach page labeled Attachment 12):
(3	3) \$		

WARNING: You must immediately tell the court if you become able to pay court fees or costs during this action. You may be ordered to appear in court and answer questions about your ability to pay court fees or costs.

(4)

SAMPLE E

ORDER ON APPLICATION FOR WAIVER OF COURT FEES AND COSTS

Sample E

ORDER ON APPLICATION FOR WAIVER OF COURT FEES AND COSTS - INSTRUCTIONS

The Court of Appeal Fifth Appellate District prepares its own order granting or denying the application for waiver of court fees and costs, therefore it is not necessary to provide an order with your application. [Note: The Court of Appeal can only waive the Court of Appeal filing fee of \$655.00.]

SAMPLE F

NOTICE DESIGNATING RECORD ON APPEAL

Sample F

NOTICE DESIGNATING RECORD ON APPEAL - INSTRUCTIONS

After filing your notice of appeal you have 10 days to tell the Superior Court what you want in the record that will be sent to the Court of Appeal; this is called the Notice Designating Record on Appeal. On the next few pages is a form to assist you in designating the record. What you choose to include in your record depends on the issues you wish to raise on appeal. This notice is filed in the Superior Court.

Filling out the Notice Designating Record on Appeal:

Page One (Notice Designating Record on Appeal):

- (1) Your name, mailing address, city, state, zip code and telephone number where you can be reached during the day.
- (2) Name of the Superior Court you are filing the designation in i.e. Fresno, Kern etc.
- (3) The plaintiff's name as it appears on your Superior Court caption.
- (4) The defendant's name as it appears on your Superior Court caption.
- (5) The Superior Court number from your Superior Court case.
- (6) Write the date you filed the notice of appeal.
- (7) The Court of Appeal number which starts with "F0". (If you don't know the Court of Appeal number or one has not yet been assigned, leave this space blank.)
- (8) Your Name. Also, check the box that applies to you. If you are the appellant, check "appellant", if you are responding to someone else's appeal, check "respondent".
- (9) Check only one box.

Check box "1" if you plan to prepare your own transcript (appendix) under California Rules of Court, rule 5.1 instead of having the Superior Court prepare a clerk's transcript and you also want a reporter's transcript. If you check this box be sure to fill out the reporter's transcript section on page three; you do not have to fill out page two.

Check box "2" if you plan to prepare your own transcript (appendix) under California Rules of Court, rule 5.1 instead of having the Superior Court prepare a clerk's transcript and you don't want a reporter's transcript. If you check this box, there is no need to fill out pages two or three. Date and sign the bottom of this form and you are done.

Check box "3" if you want the Superior Court to prepare both the clerk's transcript and the reporter's transcript. If you check this box be sure to fill out the clerk's transcript section on page two and the reporter's transcript section on page three.

Check box "4" if you want the Superior Court to prepare a clerk's transcript but you don't want a reporter's transcript. If you check this box be sure to fill out the clerk's transcript section on page two; you do not have to fill out page three.

- (10) Current date.
- (11) Type your name or print it legibly.
- (12) Your signature.

Page Two (Notice Designating Clerk's Transcript):

Fill out this page only if you checked box "3" or "4" on page one; if you checked box "1" or "2" you do not need to fill out this page. The first six documents are filled in for you. You may designate anything that was in the Superior Court file as part of your record on appeal, choosing as few or as many documents as you wish. What you choose to include in your record depends on the issues you wish to raise on appeal. You will need to make a \$100.00 deposit with the Superior Court if you select this option.

Page Three (Notice Designating Reporter's Transcript):

Fill out this page only if you checked box "1" or "3" on page one; if you checked box "2" or "4" you do not need to fill out this page. A reporter's transcript is a word for word typewritten record of everything that was said in court during a trial or hearing. For each day you want transcribed, write the reporter's name, the department of the Superior Court you were in, the date and the nature of the proceeding. The reporter's transcript costs money. You can ask the reporter to give you an estimate of what it will cost in advance or you can pay \$650 per day for days where there were more than three hours to be transcribed or \$350 per day where there were less than three hours to be transcribed.

Due: 10 days after filing Notice of Appeal

File: Original with Superior Court

Bring an extra copy to be file-stamped

for your file.

Serve: Court Reporter (if reporter's transcript requested)

All counsel

All self-represented parties

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY			
(1)				
TELEPHONE NO. (Optional) ATTORNEY FOR (Name):				
SUPERIOR COURT OF CALIFORNIA, COUNTY OF				
PETITIONER/PLAINTIFF: (3)	_			
RESPONDENT/DEFENDANT: (4)				
NOTICE DESIGNATING RECORD ON APPEAL	CASE NUMBER (5)			
RE: Appeal filed on (date): (6)	COURT OF APPEAL NUMBER (7)			
TO: Clerk of the Superior Court, County of(2)				
(Name): (8)				
Appellant Respondent				
Check only one: (9)				
 (Appendix and Reporter's Transcript) a. elects under rule 5.1 of the California Rules of Court to prepare own transcript in lieu of a -AND- b. requests a reporter's transcript as designated on page three. (Fill out the reporter's transcript as designated on page three.) 				
 (Appendix Only. No Reporter's Transcript) elects under rule 5.1 of the California Rules of Court to prepare own transcript in lieu of a court-prepared clerk's transcript. (Date and sign only.)				
6. (Clerk's and Reporter's Transcripts) elects under rules 4 and 5 of the California Rules of Court to proceed with a clerk's transcript as designated on page two AND a reporter's transcript as designated on page three. (Fill out the clerk's transcript section on page two and the reporter's transcript section on page three.)				
 4. (Clerk's Transcript Only. No Reporter's Transcript) a. elects under rule 5 of the California Rules of Court to proceed with a clerk's transcript only the clerk's transcript section on page two.) b. elects to have no reporter's transcript. 	y as designated on page two. <i>(Fill out</i>			
Date:(10)				
(11)	(12)			
(TYPE OR PRINT NAME)	(SIGNATURE)			

	CASE NUMBER:
NOTICE DESIGNATING CLERK'S (Cal. Rules of Court, ru	
t is requested that the following documents in the superior court file be included document, and accurate description, and the date of filing): NOTE: Items 1-6 are required to be a part of the clerk's transcript and will au 1. Notice of Appeal 2. Notice Designating Record on Appeal (this document) 3. Judgment or order appealed from 4. Notice of Entry of Judgment (if any) 5. Notice of Intention to Move for New Trial or Vacate Judgment (if any) 6. Ruling on item 5 7.	led in the clerk's transcript (give the specific title of the
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
18.	
19.	
20.	
See additional pages.	

	CAS	SE NUMBER:
--	-----	------------

NOTICE DESIGNATING REPORTER'S TRANSCRIPT (Cal. Rules of Court, rule 4(a)(1) & 4(a)(4))

	Reporter's Name	Dept.	Date	Nature of proceedings
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
	See additional pages.			

SAMPLE G

COVER FOR RULE 5.1 APPENDIX

Sample G

COVER FOR RULE 5.1 APPENDIX (APPELLANT'S OR RESPONDENT'S)

No. F012345

IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA FIFTH APPELLATE DISTRICT

THE THREE BEARS, Plaintiff and Respondent,	Court of Appeal No. F012345
V.	(Superior Court No. 123456-1)
GOLDILOCKS,	
Defendant and Appellant.	

Appeal From a Judgment of The Superior Court of California, County of [Name of County i.e. Fresno, Kern] The Honorable Big Bad Wolf, Judge

APPELLANT'S (or RESPONDENT'S) APPENDIX IN LIEU OF CLERK'S TRANSCRIPT

Your Name Your Address Your Phone Number During the Day

Self-Represented

SAMPLE H

CHRONOLOGICAL INDEX FOR RULE 5.1 APPENDIX

Sample H

CHRONOLOGICAL INDEX FOR RULE 5.1 APPENDIX

Chronological Index

ENTRY	DATE	PAGE
Complaint	1/01/01	01
Minute Order	2/15/01	07
Motion for Summary Judgment	4/15/01	08
Separate Statement of Undisputed Facts	4/15/01	20
Opposition to Motion for Summary Judgment	4/28/01	35
Minute Order Denying Summary Judgment	5/15/01	42
Judgment Appealed From	5/30/01	43
Notice of Entry of Judgment	6/02/01	44
Notice of Appeal	6/30/01	45

SAMPLE I

ALPHABETICAL INDEX FOR RULE 5.1 APPENDIX

Sample I

ALPHABETICAL INDEX FOR RULE 5.1 APPENDIX

Alphabetical Index

ENTRY	DATE	PAGE
Complaint	1/01/01	01
Judgment Appealed From	5/30/01	43
Minute Order	2/15/01	07
Minute Order Denying Summary Judgment	5/15/01	42
Motion for Summary Judgment	4/15/01	08
Notice of Appeal	6/30/01	45
Notice of Entry of Judgment	6/02/01	44
Opposition to Motion for Summary Judgment	4/28/01	35
Separate Statement of Undisputed Facts	4/15/01	20

SAMPLE J

CIVIL CASE INFORMATION STATEMENT

Click on link below for printable form.

Form APP-001 = http://www.courtinfo.ca.gov/forms/documents/app001.pdf

Sample J

CIVIL CASE INFORMATION STATEMENT - INSTRUCTIONS

The Civil Case Information Statement must be filed in the Court of Appeal within 10 days after the clerk mails you a notice that the form must be filed. The court recommends that you attach to the Civil Case Information Statement a file-stamped, signed by the judge copy of the order or judgment which you are appealing. You also need to attach a Proof of Service to the Civil Case Information Statement showing you served a copy of the Civil Case Information Statement with its attachment on all counsel and self-represented parties. The Civil Case Information Statement is filed in the Court of Appeal.

Filling out the Civil Case Information Statement form:

- (1) The Appellate District where you are filing your appeal.
- (2) The Division number of the Appellate District where you are filing your appeal. (Leave Blank the Fifth District does not have divisions)
- (3) Fill in the Court of Appeal case number here. If you do not know the Court of Appeal case number or one has not been assigned yet, leave this space blank.
- (4) Your name, mailing address, city, state, zip code and telephone number where you can be reached during the day.
- (5) The caption of the case as it appears on the Superior Court case.
- (6) The county in which the Superior Court case originated. List the street address, mailing address (if you have it), city, zip code and branch name of the Superior Court where your case originated.
- (7) List the names of all the Superior Court judges who participated in your case.
- (8) Fill in the Superior Court case number here.
- (9) Mark the box that best describes what you are appealing.
- (10) If your appeal disposes of all causes of action including all cross-actions between the parties check "yes". If not, check "no".
- (11) The date of entry of judgment or order appeal from.
- (12) The date notice of entry of the judgment or order was served or mailed. If none was served or mailed, leave this space blank.

- (13) Check "yes" if you made a motion for (a) new trial, (b) judgment notwithstanding the verdict, (c) reconsideration of an appealable order or (d) vacating the judgment and that motion was denied. Check the "no" box if you did not make any of the above motions. If you checked yes, write in the type of motion you filed, the date the motion was filed, the date the motion was denied and the date the denial was served.
- (14) The date you filed your notice of appeal or cross-appeal in Superior Court.
- (15) Check "yes" if you have any other appeals, writs or any other proceeding before this or any other California court. Check "no" if you do not have any other appeals, writs or proceedings before this or any other California court. If you checked "yes", write the name of the court in which you have or had a case, the appellate court case number, the title of the case, name of trial court and trial court case number. If you have or had multiple cases, attach the list of cases to this form on a separate sheet of paper.
- (16) Check if there is a bankruptcy case or any court issued stay which would have an affect on your appeal in the Court of Appeal. If you check this box you must attach to this form a file-stamped copy of the bankruptcy petition and any documentation related to the stay. Leave blank if there is no bankruptcy case or other court issued stay which would have an affect on your appeal in the Court of Appeal.
- (17) Check the box or boxes that best describe the nature of the action of your case.
- (18) Check this box if your case is entitled to calendar preference or priority on appeal. Write the rule of court or statute that entitles you to calendar preference or priority. Leave blank if your case is not entitled to calendar preference or priority.
- (19) On a separate sheet of paper, write or type all the parties and their attorneys of record who will participate in the appeal. For each party, list the party's name and designation in the trial court proceeding (plaintiff, defendant, etc.). For the attorneys, list the party the attorney represents, the name of the attorney, state bar number, mailing address, telephone number, fax number and e-mail address. If the party is self-represented, list the name, designation in the trial court proceeding (plaintiff, defendant, etc.), mailing address, telephone number, fax number and e-mail address. List only parties who will be participating in the appeal and no one else.

(20) Today's date.

(21) Your signature.

Due: 10 days after filing Notice of Appeal

File: Original plus one copy of Civil Case

Information Statement, judgment or order and

Proof of Service on all parties

Provide an extra copy to be file-stamped

for your file.

Serve: All counsel

All self-represented parties

CIVIL CASE INFORMATION STATEMENT	Court of Appeal Case Number (if known):	
COURT OF APPEAL, APPELLATE DISTRICT, DIVISION		
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY	
TELEPHONE NO.:		
E-MAIL ADDRESS (Optional): FAX NO. (Optional):		
ATTORNEY FOR (Name):		
APPELLATE CASE TITLE:		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
JUDGES (all who participated in case):	SUPERIOR COURT CASE NUMBER:	
shows the date it was entered (see Cal. Rules of Court, rule 2(c) for definition of " this form on all parties to the appeal. (CAUTION: An appeal in a limited civil case ONLY to the appellate division of the superior court (Code Civ. Proc., § 904.2), or Proc., § 116.710 [small claims cases]).	e (Code Civ. Proc., § 85) may be taken	
A. APPEALABILITY		
1. Appeal is from:		
Judgment after jury trial		
Judgment after court trial Default judgment		
Judgment after an order granting a summary judgment motion		
Judgment of dismissal under Code Civ. Proc., §§ 581d, 583.250, 583.360, or 583.430		
Judgment of dismissal after an order sustaining a demurrer		
An order after judgment under Code Civ. Proc., § 904.1(a)(2) An order or judgment under Code Civ. Proc., § 904.1(a)(3)–(13)		
Other (describe and specify code section that authorizes this appeal):		
2. Does the judgment appealed from dispose of all causes of action, including all cross-actions between the parties?		
If not, please explain why the judgment is appealable:		
D. TIMELINICOO OF ADDEAL (D. 11. W. W. J. J. J. J.		
B. TIMELINESS OF APPEAL (Provide all applicable dates.)1. Date of entry of judgment or order appealed from://		
 Date that notice of entry of judgment or a copy of the judgment was mailed by the of Court, rule 2://	clerk or served by a party under Cal. Rules	
3. Was a motion for new trial, judgment notwithstanding the verdict, reconsideration, of Yes No If yes, please specify the type of motion:	or to vacate the judgment made and denied?	
Date motion filed:/ Date denied:/ Date de	enial served:/	
4. Date notice of appeal or cross-appeal filed:/	Page 1 of 2	

APPELLATE CASE TITLE:	SUPERIOR COURT CASE NUMBER:
C. APPELLATE CASE HISTORY (Provide additional information, Is there now, or has there previously been, any appeal, writ, or appellate court? Yes No If yes, insert name of appellate court: Appellate court case no.: Title of case: Name of trial court: Trial court case no.: D. BANKRUPTCY OR OTHER STAY	
Related bankruptcy case or a court-ordered stay affects to	nis appeal. (Attach a copy of the petition and any stay order.)
PART II – NAT	JRE OF ACTION
A. Nature of action (check all that apply): 1. Conservatorship 2. Contract 3. Eminent domain 4. Equitable action a. Declaratory relief b. Other (describe): 5. Family law 6. Guardianship 7. Probate 8. Real property rights a. Title of real property b. Other (describe): 9. Tort a. Medical malpractice b. Product liability c. Other personal injury d. Personal property e. Other tort (describe): B. This appeal is entitled to calendar preference/priority on a	Trust proceedings Unfair competition (Bus. & Prof. Code, § 17200) If this box is checked, refer to rule 15(e)(2), Cal. Rules of Court Writ proceedings in superior court a.
Please attach to this form a list of all the parties and all their attorne	signation in the trial court proceeding (plaintiff, defendant, etc.). For
	Date:
This statement is prepared and submitted by:)
	(SIGNATURE OF ATTORNEY OR UNREPRESENTED PARTY

SAMPLE K

APPELLANT'S OPENING BRIEF

Sample K

BRIEF - INSTRUCTIONS

Appellant's Opening Brief is due 30 days from the date the record on appeal is filed in the Court of Appeal or 70 days from the date you elected to proceed by way of rule 5.1 with no reporter's transcript. The cover of Appellant's Opening Brief is green. If you are an appellant and you do not file an Appellant's Opening Brief your appeal will be dismissed.

Respondent's Brief is due 30 days from the date the Appellant's Opening Brief is filed. The cover of Respondent's Brief is yellow. If you are a respondent and you do not file a Respondent's Brief, the court will decide the appeal on the record, the opening brief and any oral argument by the appellant. You will not be able to orally argue your case if you are a respondent and don't file a Respondent's Brief.

Appellant's Reply Brief is optional but if you want to file one it is due 20 days from the date the Respondent's Brief is filed. The cover of Appellant's Reply Brief is tan. There is no penalty for not filing an Appellant's Reply Brief.

Each brief must contain a Table of Contents and a Table of Authorities. A brief must not be longer than 14,000 words, or approximately 50 pages. An original plus four copies of the brief must be filed in the Court of Appeal. A proof of service must accompany the brief showing service on the Supreme Court (5 copies), the Superior Court (1 copy), all counsel and self-represented parties.

Cover: Appellant's Opening Brief - green

Respondent's Brief - yellow

Appellant's Reply Brief - tan

File: Original plus 4 copies along with

Proof of Service in Court of Appeal

No. F012345

IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA FIFTH APPELLATE DISTRICT

THE THREE BEARS, Plaintiff and Respondent, v.	Court of Appeal No. F012345 (Superior Court No. 123456-1)
GOLDILOCKS,	
Defendant and Appellant.	

Appeal From a Judgment of The Superior Court of California, County of (Name of County i.e. Fresno, Kern) The Honorable ROY BEAN, Judge

APPELLANT'S OPENING BRIEF

Your Name, self-represented Your Address Your Phone Number During the Day

TABLE OF CONTENTS

	Page
TABLE OF AUTHORITIES	ii
STATEMENT OF THE CASE	1
STATEMENT OF APPEALABILITY	1
STATEMENT OF THE FACTS	1
ARGUMENT	
I. THE EVIDENCE WAS INSUFFICIENT TO SUPPORT THE FINDING OF TRESPASS	2
A. The Standard of Review	2
B. Elements of the Action	2
C. No Evidence of Wrongful Entry	3
CONCLUSION	3

TABLE OF AUTHORITIES

CASES

	Page
Gallin v. Poulou (1956) 140 Cal.App.2d 638, 645.	2
Miller v. National Broadcasting Co. (1986) 187 Cal.App.3d 1463, 1480.	2
Williams v. General Elec. Credit Corp. (1946) 159 Cal.App.2d 527, 532.	2
Williams v. Wraxall (1995) 33 Cal.App.4th 120, 132.	2
STATUTES (if any)	
<u>OTHER</u>	
The Restatement 2nd of Torts, section 167.	2

STATEMENT OF THE CASE ¹

The Three Bears filed a complaint in August 2001 alleging Goldilocks had trespassed on their property by entering their home when they were not at home, consuming a meal and falling asleep in a bed. (CT 1-3) ² Frightened at discovering Goldilocks, Baby Bear has suffered resulting physical and mental damages in the amount of \$50,000 as testified to by an expert bear/child psychologist. (RT 80-83) ³ After a civil trial on the matter over a period of two days, the court found Goldilocks had committed trespass and awarded Bears \$50,000. (CT 47) ⁴

STATEMENT OF APPEALABILITY

This appeal is from the judgment of the Fresno County Superior Court and is authorized by the Code of Civil Procedure, section 904.1, subsection (a)(1).

STATEMENT OF FACTS

[NOTE: Your statement of facts must have references to where in the record the facts can be found.]

Papa Bear lives in Fresno, California with his wife, Mama Bear and son, Baby Bear. Appellant Goldilocks lives a few miles away on the other side of the forest. (RT 10-11) The Bears' neighbor, Gloria Gardner, watched what happened from her garden next door. (RT 42)

Gardner testified she saw the Bear family leave their house without shutting the front door about 8:00 a.m. and saw Goldilocks enter the house at about 8:30. At about 9:30 a.m. she heard screams and saw Goldilocks run from the Bears' house. (RT 43-44)

The Bears testified that when they returned from the walk, they saw they had left the front door open. (RT 11) Food was missing from the dining room table. (RT 12) Baby Bear found Goldilocks asleep in his bed. Terrified, Baby Bear screamed and woke up Goldilocks. (RT 35) Startled and confused, Goldilocks ran from the Bears' house. (RT 55)

An expert bear cub psychologist, Dr. Dramatic, who has done extensive research in the

1

Type size must be 13-point or larger. Lines must be at least one-and-a-half spaced. (CRC rule 14(b)(4)&(5)

² Cite to pages in record where complaint is located

³ Cite to pages in reporter's transcript that contain expert's testimony

Cite to pages in record where court's ruling is located

phobias of young bears, testified to the traumatic effects when a bear cub comes in contact with a human child. Baby Bear had physical symptoms of blackouts stemming from his encounter with Goldilocks as well as mental anguish requiring therapy. (RT 80-83)

Goldilocks testified she was looking for a boarding facility to take a rest, the Bears' house was very large, there was no fence to indicate this was private property, the door of the house was left open and there was a mat at the front door that said "WELCOME". She thought this was a commercial boarding establishment, as large amounts of food were set out as if for guests; she looked for someone to ask about spending the night and saw several sets of chairs and beds all in different sizes. She sat down on a bed and fell asleep. (RT 54-55)

ARGUMENT

Issue 1

GOLDILOCKS WAS GIVEN IMPLIED CONSENT TO ENTER THE HOUSE AND THUS HER ENTRY WAS NOT "WRONGFUL"

A. The Standard of Review. The trial court erred in finding that Goldilocks trespassed on the Bears' property as there is no substantial evidence to support that finding. On review, the appellate court looks to the record to see if there are facts to the support the trial court or jury's findings. If there is any substantial evidence to support the verdict, the court will affirm. If there are conflicts in the facts, the court will resolve the conflict in favor of the party who won in the trial court. (Williams v. Wraxall (1995) 33 Cal.App.4th 120, 132.)

B. The Elements of the Action. A trespass occurs when a person intentionally, recklessly or negligently enters land in the possession of another. (Gallin v. Poulou (1956) 140 Cal.App.2d 638, 645.) The intent to enter is the only intent needed. (Miller v. National Broadcasting Co. (1986) 187 Cal.App.3d 1463, 1480.) However, consent or permission to enter upon the property is a defense. (Williams v. General Elec. Credit Corp. (1946) 159 Cal.App.2d 527, 532; Rest.2d Torts, section 167.)

C. No Evidence of Wrongful Entry. Here, Goldilocks did not intend to enter on private property. She thought the Bears' house was a public, commercial boarding house. (RT 54-55) Although her actual intent is not a legal defense, her actual intent reinforces her argument that she had consent to enter the building. The door was open, the

WELCOME mat was out, the food was on the table, and there were many beds and chairs about. (RT 54) All of this points to the conclusion the Bears were prepared for and awaiting the arrival of numerous persons and supports Goldilocks' belief this was a boarding house and there was no reason for her not to enter. At a minimum the house was prepared and open for an "open house". No evidence points to any indication the house was closed, off-limits to outsiders, or limited in the types of persons who would be admitted. There is no evidence to support a finding Goldilocks' entry was wrongful. The judgment must be reversed.

CONCLUSION

Goldilocks submits the Three Bears have failed to meet their burden of proving that her entry into their house was wrongful and, thus, a trespass. All of the evidence supports a finding that the Bears by their conduct consented to Goldilocks' entry into the house. Goldilocks respectfully asks that this Court reverse the decision of the trial court and vacate the award of damages.

	Respectfully submitted,
DATED:	By(Signature)
	(Your name-printed or typed)

SAMPLE L

MEMORANDUM OF POINTS AND AUTHORITIES FOR MOTION TO AUGMENT

Sample L

MEMORANDUM OF POINTS AND AUTHORITIES FOR MOTION TO AUGMENT - INSTRUCTIONS

A Memorandum of Points and Authorities in support of your motion to augment must be attached to the motion to augment. [NOTE: This memorandum is only a sample. You should give your own reason in paragraph 2 and your own circumstances in paragraph 3 as to why you need to augment the record and why there is no prejudice.]

Filling out the Memorandum of Points and Authorities Form:

- (1) Today's date.
- (2) Your signature.
- (3) Type or legibly print your name.

File: Original plus 4 copies

(The Memorandum of Points and Authorities (Sample L) and Declaration (Sample M) are attached to the Motion to Augment) along with a

Proof of Service

Provide an extra copy to be file-stamped for your file.

Serve: Superior Court

All counsel

MEMORANDUM OF POINTS AND AUTHORITIES

AUGMENTATION SHOULD BE ORDERED TO ALLOW APPELLANT TO RECEIVE FULL AND FAIR APPELLATE REVIEW

Rule 12(a) of California Rules of Court permits the augmentation of the appellate record and specifically under Rule 12(a)(1) allows a certified transcript or document not designated under Rule 4 to be augmented and permitted. It is well established that this rule is to be construed liberally. (*People v. Brooks* (1980) 26 Cal.3d 471, 484.)

The need for augmentation here is compelling. Appellant believes the court used the incorrect standard of review. The issue can only be reviewed on appeal if the reporter's transcript of the court's comments before ruling is part of the appellate record.

Not only is augmentation necessary, it will not prejudice any party. The augmentation request concerns documents which were all part of the record. Additionally, the augmentation will not cause a substantial delay in this appeal.

CONCLUSION

For the above rea	sons, this Court should order the record to be augmented on appeal by
including the reporter's	transcript or document(s) requested in this motion.
Dated: (1)	Respectfully Submitted,

(2)
Signature
(3)
Type or Print Name

SAMPLE M

DECLARATION IN SUPPORT OF MOTION TO AUGMENT

Sample M

DECLARATION IN SUPPORT OF MOTION TO AUGMENT - INSTRUCTIONS

A declaration in support of your motion to augment must be attached to the motion. [NOTE: This declaration is only a sample. You should insert you own reasons in paragraphs 3 and 4 and add your own support for paragraph 6.]

Filling out the Declaration in Support of Motion to Augment form:

- (1) Your name.
- (2) The date of the hearing you want to augment.
- (3) The date of the hearing you want to augment.
- (4) Today's date.
- (5) Month and year.
- (6) City where you signed the declaration.
- (7) Your signature.
- (8) Type or legibly print your name.

File: Original plus 4 copies

(The Memorandum of Points and Authorities (Sample L) and

Declaration (Sample M) are attached to the Motion to Augment) along with a

Proof of Service

Provide an extra copy to be file-stamped for your file.

Serve: Superior Court

All counsel

All self-represented parties

DECLARATION IN SUPPORT OF MOTION TO AUGMENT

I, (1)	, declare and sta	te as follows:		
1. I am a self-represented litigant.				
2. On (2)	, I argued t	he matter before the Hor	norable J. Judge. The	
court reporter reported the matter.				
3. I did not order the reporte	r's transcript of	(3)	, thinking it was	
unnecessary.				
4. I believe the court used th	e incorrect stand	ard of review. The cour	t's comments before	
announcing its ruling are material	to this issue. The	transcript of that hearing	g is therefore a	
necessary element of the record on	appeal.			
If documents attached use 5 below.	:			
5. Because the document(s) i	requested is attac	hed to this motion, there	will be no	
significant delay, and possibly no	delay at all with t	his appeal.		
6. I know of no prejudice to any party as a result of the granting of this motion.				
7. This motion is made in go	od faith for the re	easons set forth above ar	nd not for the	
purposes of delay.				
I declare under penalty of pe	rjury that the for	egoing is true and correc	t.	
Executed this (4) day	of (5)	, at (6)	,	
California.				
	(7)			
		Signature		
	(8)			
		Type or Print Name		

SAMPLE N

MOTION TO AUGMENT RECORD ON APPEAL (DOCUMENTS ATTACHED)

Sample N

MOTION TO AUGMENT RECORD ON APPEAL (DOCUMENTS ATTACHED) - INSTRUCTIONS

After the record on appeal is filed, you might discover there is something missing from the record that you think the court should consider when deciding your case. You may make a Motion to Augment Record on Appeal (Documents Attached). Attach the documents to your motion to augment that you want added to the record on appeal. The motion is filed in the Court of Appeal. You must file an original plus three copies of the motion, your points and authorities (Sample L) and your declaration (Sample M). You must serve your motion on all parties.

Filling out the Motion to Augment Record on Appeal (Documents Attached):

- (1) Your name.
- (2) Your mailing address.
- (3) Your city, state and zip code.
- (4) Your telephone number where you can be reached during the day.
- (5) The plaintiff's name as it appears on your Superior Court caption.
- (6) Whether plaintiff is "appellant" or "respondent".
- (7) The defendant's name as it appears on your Superior Court caption.
- (8) Whether defendant is "appellant" or "respondent".
- (9) The Court of Appeal case number which begins with "F0".
- (10) The Superior Court number from your Superior Court case.
- (11) Your name.
- (12) List the documents you are attaching, for example:
 - 1. Order dated August 20, 2004.
 - 2. Declaration of John Doe dated August 30, 2004.
- (13) State why you are requesting the item(s) be added. For example, forgot to list it in Notice Designating Record, just learned I need the item to support argument, etc.

- (14) Today's date.
- (15) Month and year.
- (16) Your signature.

(17) Type or legibly print your name.

File: Original and 4 copies with

Court of Appeal

(The Memorandum of Points and Authorities (Sample L) and

Declaration (Sample M) are attached to the Motion to Augment) along with a

Proof of Service

Provide an extra copy to be file-stamped

for your file.

Serve: All counsel

All self-represented parties

(4)			
(1) (2) (3) (4)			
СО	URT OF APPEAL, FIFTH	APPELLATE DISTRICT	
	STATE OF CAL	LIFORNIA	
(5) Plaintiff and (6) v. (7) Defendant and (8)	, ,	F (9) (Superior Court No. (10) MOTION TO AUGMENT RE APPEAL (DOCUMENTS AT	
Pursuant to Rule 12(a) of the California Rules of Court, I, (11) , request augmentation of the record on appeal to include documents in this case that were not included in the Clerk's Transcript. Copies of the documents to be added to the record are attached to this motion. Those documents are:			
(12)			
(13)			
I declare under penalty of perjury that the foregoing is true and correct.			
Executed at	, California this (14)	day of (15) .	
	(17)	nature pe or Print Name	

SAMPLE O

MOTION TO AUGMENT RECORD ON APPEAL CLERK'S AND/OR REPORTER'S TRANSCRIPTS (DOCUMENTS REQUESTED)

Sample O

MOTION TO AUGMENT RECORD ON APPEAL CLERK'S AND/OR REPORTER'S TRANSCIPTS (DOCUMENTS REQUESTED) INSTRUCTIONS

After the record on appeal is filed, you might discover there is something missing from the record that you think the court should consider when deciding your case. If you do not have copies of the documents you want to include, you may make a Motion to Augment Record on Appeal (Documents Requested). The motion with points and authorities (Sample L) and your declaration (Sample M) is filed in the Court of Appeal. You must file an original plus three copies. You must serve your motion on the Superior Court, all counsel and all self-represented parties. If the court grants your motion, the Superior Court clerk will give you an estimate of how much it will cost to copy the documents you list to be included in the record. You have five days from the date you are given the estimate to pay it in Superior Court. If you do not pay it, you will be placed in default.

Filling out the Motion to Augment Record on Appeal (Documents Requested):

- (1) Your name.
- (2) Your mailing address.
- (3) Your city, state and zip code.
- (4) Your telephone number where you can be reached during the day.
- (5) The plaintiff's name as it appears on your Superior Court caption.
- (6) Whether plaintiff is "appellant" or "respondent".
- (7) The defendant's name as it appears on your Superior Court caption.
- (8) Whether defendant is "appellant" or "respondent".
- (9) The Court of Appeal case number which begins with "F0".
- (10) The Superior Court number from your Superior Court case.
- (11) Your name.

- (12) List the documents and/or transcripts you are requesting, for example:
 - 1. Order dated August 20, 2004.
 - 2. Declaration of John Doe dated August 30, 2004.
 - 3. Hearing on June 15, 2004 from 9:00 a.m. to 11:30 a.m. Court reporter is John Doe.
 - 4. Hearing on June 16, 2004, all day beginning at 9:00 a.m. Court reporter is Jane Doe.
- (13) State why you are requesting the item(s) be added. For example, forgot to include it in Notice Designating Record, etc.
- (14) Today's date.
- (15) Month and year.
- (16) Your signature.
- (17) Type or legibly print your name.

File: Original plus 4 copies with

Court of Appeal

(The Memorandum of Points and

Authorities (Sample L) and

Declaration (Sample M) are attached to

the Motion to Augment) along with a

Proof of Service

Provide an extra copy to be file-stamped

for your file.

Serve: Superior Court

All counsel

All self-represented parties

(1) (2) (3) (4)			
COURT OF APPEA	L, FIFTH	APPELLATE DISTRICT	
STAT	E OF CA	LIFORNIA	
(5)		F(9) .	
(5)	,	(Superior Court No. (10))
Plaintiff and (6)	,	MOTION TO AUGMENT	
V.		APPEAL (DOCUMENTS I	REQUESTED)
(7)	,		
Defendant and (8)			
Pursuant to Rule 12(a) of the California Rules of Court, I, (11) , request augmentation of the record on appeal to include documents in this case that were not included in the Clerk's and/or Reporter's Transcript. Those documents are: (12)			
The reason I am requesting the items(s) i	s:		
(13)			
I declare under penalty of perjury that the foregoing is true and correct.			
Executed at , California this	s (14)	day of (15)	
	(16) Sig	gnature	
	(17)		
		rpe or Print Name	

SAMPLE P

APPLICATION FOR EXTENSION OF TIME TO FILE BRIEF

Sample P

APPLICATION FOR EXTENSION OF TIME TO FILE BRIEF - INSTRUCTIONS

If you cannot file your brief on time, ask the opposing party to stipulate to an extension. Stipulations of up to 60 days result in automatic extensions and need only to be filed in the Court of Appeal. If you have already had 60 days in extensions or are unable to get the opposing party to stipulate, you then need to ask the Court of Appeal for an extension of time before the time your brief is due. You need to file an original application accompanied by stamped-addressed envelopes and copies of the request for yourself and each party. You must serve a copy of your request on all parties before filing the application with the Court of Appeal.

Filling out the Application for Extension of Time to File Brief form:

- (1) Your name.
- (2) Your mailing address.
- (3) Your city, state and zip code.
- (4) Your telephone number where you can be reached during the day.
- (5) The plaintiff's name as it appears on your Superior Court caption.
- (6) Whether plaintiff is "appellant" or "respondent".
- (7) The defendant's name as it appears on your Superior Court caption.
- (8) Whether defendant is "appellant" or "respondent".
- (9) The Court of Appeal number which begins with "F0".
- (10) The Superior Court number from your Superior Court case.
- (11) Write the type of brief for which you are requesting an extension of time. For example, "Appellant's Opening", "Respondent's" or "Appellant's Reply".
- (12) Write the type of brief for which you are requesting an extension of time. For example, "Appellant's Opening", "Respondent's" or "Appellant's Reply".
- (13) Write the date you would like your brief due. Hint: Do not ask for more than 60 days and do not leave the date open-ended.
- (14) Write the date your brief is presently due.

- (15) If you have received a rule 17 notice write "has". If you have not received a rule 17 notice write "has not".
- (16) Write the number of extensions you have received. If you have not received any extensions, write "no".
- (17) Write the number of days extension you have already received.
- (18) Write the reason you are unable stipulate to an extension.
- (19) Write the reason you need more time to file your brief.
- (20) Today's date.
- (21) Month and year.
- (22) Your signature.
- (23) Type or legibly print your name.

File: Original with a Proof of Service on all counsel and self-represented parties (if you are an attorney, serve your client)

(CRC rule 45(f))
together with copies and preaddressed, stamped envelopes for each party.

Serve: All counsel
All self-represented parties
(If you are an attorney, serve your client.)

(1) (2) (3) (4)		
COUR	T OF APPEAL, FIFTH STATE OF CA	APPELLATE DISTRICT LIFORNIA
(5) Plaintiff and (6) v. (7) Defendant and (8)	, ,	F(9) (Superior Court No. (10) APPLICATION FOR EXTENSION OF TIME TO FILE (11)
I request the time to file (12) Present due date is (14) Notice under rule 17 (15) (16) extension I am unable to stipulate to a The reason I need an extension	issued. ns totaling (17) ha an extension because (18)	Se extended to (13) Eve been received. By .
I declare under penalty of p Executed at	coerjury that the foregoing , California this (20) (22)	day of (21) . Signature

SAMPLE Q

PETITION FOR REHEARING

Sample Q

PETITION FOR REHEARING - INSTRUCTIONS

After the opinion has been filed in your case, or a request for publication granted or modification of opinion changing judgment, you have 15 days to ask the Court of Appeal for a rehearing. You ask for a rehearing if you feel that the opinion misstates the facts, has an error of law, has a significant omission in the facts or law or failed to consider an important argument. The petition for rehearing has an orange cover. An original plus four copies of the petition for rehearing must be filed in the Court of Appeal. A proof of service showing service on the Supreme Court, the Superior Court and all counsel and self-represented parties must accompany the petition for rehearing.

Filing out the Cover Page:

- (1) The plaintiff's name as it appears on your Superior Court caption.
- (2) Whether plaintiff is "appellant" or "respondent".
- (3) The defendant's name as it appears on your Superior Court caption.
- (4) Whether defendant is "appellant" or "respondent".
- (5) The Court of Appeal case number which begins with "F0".
- (6) The Superior Court number from your Superior Court case.
- (7) Write the county where the Superior Court case originated.
- (8) The name of the Superior Court judge.
- (9) Your name.
- (10) Your mailing address.
- (11) Your city, state and zip code.
- (12) Your telephone number where you can be reached during the day.

Filling out the Petition for Rehearing:

- (1) Your name.
- (2) Your mailing address.
- (3) Your city, state and zip code.

- (4) Your telephone number where you can be reached during the day.
- (5) The plaintiff's name as it appears on your Superior Court caption.
- (6) Whether plaintiff is "appellant" or "respondent".
- (7) The defendant's name as it appears on your Superior Court caption.
- (8) Whether defendant is "appellant" or "respondent".
- (9) The Court of Appeal case number.
- (10) The Superior Court number from your Superior Court case.
- (11) Write whether you are "appellant" or "respondent".
- (12) Your name.
- (13) The date the opinion was filed.
- (14) Why you think there should be a rehearing.
- (15) The arguments in support of your reason why there should be a rehearing.
- (16) Write "affirm", "reverse" or "modify", however you think the court should have ruled in its opinion.
- (17) Current date.
- (18) Your signature.
- (19) Type or legibly print your name.

Due: 15 days after opinion filed, or request for

publication granted or modification of

opinion changing judgment.

Cover Color: Orange

File: Original plus 4 copies with Court of Appeal

with Proof of Service

Provide an extra copy to be file-stamped for

your file.

Serve: California Supreme Court - 5 copies

Superior Court - 1 copy

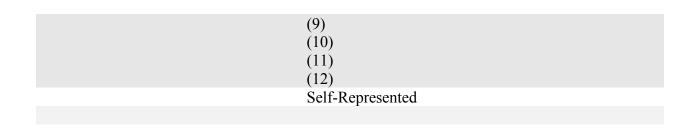
All counsel

All self-represented parties

COURT OF APPEAL, FIFTH APPELLATE DISTRICT STATE OF CALIFORNIA

			F(5)		
(1)		,			
	Plaintiff and (2) , v.		(Superior Court N	No. (6))
(3)		,			
(-)	Defendant and (4) .	,			
	Appeal From the Superior Honorable (8		of (7)	.County	

PETITION FOR REHEARING



(1) (2) (3) (4)		
COURT OF A	APPEAL, FIFTH A STATE OF CALI	PPELLATE DISTRICT FORNIA
Plaintiff and (6) v. (7)	,	F(9) . (Superior Court No. (10)
Defendant and (8)		
I	PETITION FOR RE	HEARING
(11) , (1) court's opinion in the above case because (14)	12) filed on (13)	, seeks rehearing of the . The rehearing is necessary
(15)		
	CONCLUSI	ON
Petitioner requests that relate judgment.	nearing be granted a	nd that the court (16)
DATED: (17)	(18)	Signature